



TENNESSEE DEPARTMENT OF REVENUE  
TAXPAYER AND VEHICLE SERVICES DIVISION  
MULTI-PURPOSE APPLICATION

COMPLETE THE SHADED  
AREAS TO REQUEST A  
**DUPLICATE TITLE**

NEW OR CURRENT TITLE NUMBER				TRANSACTION CODE*		REGISTRATION ONLY NUMBER												
OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 25 CHARACTERS) <input type="checkbox"/> MAO <input type="checkbox"/> ILU <input type="checkbox"/>																		
LAST NAME FIRST NAME MIDDLE INITIAL				LAST NAME FIRST NAME MIDDLE INITIAL														
ADDRESS 1 (MAILING)				ADDRESS 2 (PHYSICAL)				CITY		STATE		ZIP CODE						
CITY				STATE		ZIP CODE		ADDITIONAL OWNER										
CNTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION			PURCHASE DATE		*LEASED <input type="checkbox"/> * SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS		TELEPHONE #		*PLACARD / HEARING IMPAIRED CLS/YR		*INSURANCE POLICY #							
VEHICLE INFORMATION																		
VIN			MAKE		MODEL		YEAR		BODY		TITLE BRAND -list the appropriate code (N) NEW (1) RECONSTRUCTED VEHICLE (U) USED (2) FLOOD DAMAGE (D) DEMO (3) SPECIALLY CONSTRUCTED (8) PARTS ONLY		CODE		TYPE OF FUEL - list the appropriate code GAS (1) ELECTRIC/HYBRID (3) DIESEL (2) PROPANE (4)		CODE	
SURRENDERED TITLE #			STATE		PREVIOUS STATES TITLED		VEHICLE USE		VEHICLE TYPE		CURRENT MILEAGE		ODOMETER INDICATOR (List one)		ACTUAL (0) NOT ACTUAL (8) OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)		CODE	
COLOR CODE (enter appropriate code)* UPPER LOWER			MOBILE HOME LGTH		WDTH		# AXLES		GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION		COMPANY VEHICLE #					
PLATE INFORMATION * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS																		
PLATE #(1)		CLASSCODE/ISSUEYR(1)(3)			VALIDATION # (1)		COUNTY STICKER # (1)		CITY STICKER # (1) (2)		*PLATE # (TRADE IN) (2)		CLASS CODE/ISSUE YR (2)		EXPIRATION DATE (1) (2) (3)			
TDS STICKER # (4)		TEMP OPERATOR PERMIT # (3)			# OF SEATS (5)		ZONE (COUNTY NAME) (6)		USDOT / REGISTRANT # (7)		MOTOR CARRIER # (8)							
LIEN INFORMATION (if lien present)																		
LIEN CODE		FIRST LIENHOLDER										LIEN DATE						
STREET				CITY				STATE				ZIP CODE						
LIEN CODE		SECOND LIENHOLDER										LIEN DATE						
STREET				CITY				STATE				ZIP CODE						
*LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE) LEGAL STATUS <input type="checkbox"/> NAME CODE <input type="checkbox"/> MAO <input type="checkbox"/> ILU <input type="checkbox"/>																		
NAME						NAME												
ADDRESS						CITY				STATE				ZIP CODE				
VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)																		
SALE PRICE			TRADE IN ALLOWANCE			TAXABLE AMOUNT			SALESTAX PAID			*TAX EXEMPTION REASON / SALES TAX #						
DEALER NAME					DEALER ADDRESS					DEALER #								
* Required for Duplicate Title - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)																		
<input type="checkbox"/> LOST		<input type="checkbox"/> STOLEN		<input type="checkbox"/> MUTILATED		<input type="checkbox"/> RTN'D DUE TO NON DELIVERY		<input type="checkbox"/> ALTERED		<input type="checkbox"/> ILLEGIBLE								
Under penalties of perjury, I hereby certify all information provided is true and correct to the best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division or its assignees to determine the accuracy of the information provided by me or on my behalf.																		
SIGNATURE OF CERTIFIER /OWNER						POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE)						DATE						
INVOICE NUMBER				COUNTY NAME				CO NUMBER		DATE OF APPLICATION		BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)						
(total fees collected indicated certifies this form as a valid registration)																		
REGISTRATION FEE		CREDIT		LEASE FEE		TRANSACTION FEE		ISSUANCE FEE		TITLE FEE		TOTAL TAX COLLECTED						
COMPUTATION OF		SALES OR USE TAX		LOCAL RATE		ADDITIONAL TAX		COLLECTED IN STATE OF		COUNTY WHEEL TAX		CITY WHEEL TAX						
<input type="checkbox"/> SALES TAX <input type="checkbox"/> USE TAX		ORGAN DONOR		POSTAGE		VER		ID / RESIDENCY VERIFICATION		*TOTAL FEES COLLECTED								

## **INSTRUCTIONS: APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE**

**PLEASE READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION. FAILURE TO PROVIDE ALL INFORMATION MAY RESULT IN YOUR APPLICATION BEING RETURNED.**

1. Duplicate Title Fee      \$12.50
2. A duplicate Certificate of Title is mailed to the owner's address as shown on the application. In the event there is a lien shown on the records of the Title and Registration Division, the duplicate certificate will be mailed to the lienholder. If the lien has been discharged, the applicant should obtain from the lienholder a Notice of Discharge of Lien. This notice shall accompany applicant's request for a duplicate Certificate of Title.
3. The completed Certificate of Duplicate Certificate of Title should be signed and mailed with payment and supporting documentation, if applicable, to the Shelby County Clerk, 150 Washington Ave., Memphis, TN 38103, ATTN: Title Department.
4. Certification for Duplicate Certificate of Title cannot be used to support an Application for Noting of Lien. If Certificate of Title has been lost, stolen or mutilated, a duplicate must be obtained prior to filing an Application for Noting of Lien.
5. Certification for Duplicate Certificate of Title cannot be used to support an original Application for Certificate of Title. If registered owner's Certificate of Title cannot be secured, a duplicate must be obtained and assigned prior to filing Application for Certificate of Title in new owner's name.

NOTE: To obtain a duplicate Certificate of Registration, submit the request in writing; include your license plate number and decal number, if applicable, with the required fee of \$1.50 to the Shelby County Clerk, 150 Washington Ave., Memphis, TN 38103.